

## APPLICATION FOR CERTIFICATION

Pursuant to Arizona Revised Statutes 5516-947 and 948 and AAC R2-20-104 (D)



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□ Amended Application

Tillida Approducti Di Antinos Approducti		2004	13024
NAME OF CANDIDATE	OFFICE SOLIGHT (include Leg	islative Dietric	f. if applicable)
Royce T. Flora	HOUSE of READ	, 4D E	3
ADDRESS (NUMBER & STREET)	CITY	STATE	ZIP
4720 N.82 19 Street	Frottodale	A7	85251
MAJUNG ADDRESS (If different from above)	CITY	STATE	ZIP
Flore			
CANDIDATE'S TELEPHONE # CANDIDATE'S FAX #	CANDIDATE'S E-MAIL ADDRE	ŝs ,	
(480) 945-5977 (480) 423-0794	Royce @ 34	-action	K. Com
CANDIDATE'S PARTY AFFILIATION (if any)			
Republican			
NAME OF CANDIDATE'S COMMITTEE			
VeteRouse Flora			
COMMITTEE'S ADDRESS	CITY A 1	STATE.	ZIP
4728 N. 82 7 Stract	Footsdale	AZ	85251
COMMITTEE'S PHONE # COMMITTEE'S FAX #	COMMITTEE'S E-MAIL ADDRE	<u></u>	M 1 0 M
(480) 945-597+ (480) 423-0794	www.Royce	2004	, USCA
NAME OF DESIGNATED INDIVIDUAL WITH AUTHORITY TO WITHDRAW FUNDS (IF APPLIC	CABLE) (A.R.S. §16-9487		
Ann R. Hora			
DESIGNATED INDIVIDUAL'S ADDRESS	CITY	STATE	ZIP
4720 N. 8211 Street	5cottodale	AZ 1	85251
DESIGNATED INDIVIDUAL'S TELEPHONE # DESIGNATED INDIVIDUAL'S FAX #	DESIGNATED INDIVIDUAL'S E	-MAIL ADDR	ESS
(480) 945-5977 (480) 423-0794	1 Ann O Royc	9 20	04. CON
<i>y</i> -			
LIST THE NAME OF THE FINANCIAL INSTITUTION FROM WHICH THE CANDIDATE AND THE FINANCIAL ACTIVITY FOR THE CANDIDATE'S CAMPAIGN COMMITTEE (do not list account	HE DESIGNATED INDIVIDUAL WI	ILL CONDUCT	FALL
Wells Farge Bank	which is a second to a security.		
J			
DESIGNATED CANDIDATE'S STATEMENT (If applicable) (A R S	. 64C 040/DW . I b		

DESIGNATED CANDIDATE'S STATEMENT (If applicable) (A.R.S. §16-948(B)): I hereby designate And A. F. as my duly authorized Designated Individual, with the authority to withdraw funds and make expenditures from my campaign account on my behalf.

Date: 1/5/04
Candidate's signature: 12/192 1 1/102

GCEC-003-APP/CERT-08/28/01